CLAIMS ONLY						Application Number 10/070,209					Filing Date	
						Applicant(s)						

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1							51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9							59						
10							60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
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21							71						
22							72						
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30							80						
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33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep							Total Indep						
Total Depend							Total Depend						
Total Claims							Total Claims						

CLAIMS ONLY			Application Number 10/070209	Filing Date
			Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend			Indep	Depend	Indep	Depend	Indep	Depend
101								51						
102								52						
103								53						
104								54						
105								55						
106								56						
107								57						
108		1						58						
109								59						
1 10								60						
1 11								61						
1 12								62						
13								63						
14								64						
15								65						
16								66						
17								67						
18								68						
19		8						69						
20		8						70						
21								71						
22								72						
23								73						
24								74						
25								75						
26								76						
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32								82						
33								83						
34								84						
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36								86						
37								87						
38								88						
39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
Total Indep	1							Total Indep						
Total Depend	4							Total Depend						
Total Claims	5							Total Claims						